

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MD		10-23
O.I.P.E. CLASSIFIER	SD	21	11/16/01
FORMALITY REVIEW	SD	11/26/01	
RESPONSE FORMALITY REVIEW	SA	JC1629	02-26-02

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 -+ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	11/26/01
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3	11/26/01
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J1629 11/26/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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11-26-01

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